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PTO/SB/21 (08-03)

Approved for use through 07/31/2006, OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| | |
|------------------------|----------------|
| Application Number | 10/650,891 |
| Filing Date | 8/28/2003 |
| First Named Inventor | Ciprian Gocman |
| Group Art Unit | 2131 |
| Examiner Name | |
| Attorney Docket Number | MS1-1684US |

ENCLOSURES (check all that apply)

| | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawings(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO-1449; reference copies (6); return receipt postcard |
| Remarks | | |

22801

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|------------------------------|
| Firm or Individual Name | Brian G. Hart/Reg. No. 44421 |
| Signature | |
| Date | 01/06/05 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

| | |
|-----------------------|------------------|
| Typed or printed name | LeAnn M. Sassman |
| Signature | |
| Date | 1/6/05 |

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E8554746695

PTO/SB/17 (12-04)

Approved for use through 07/31/2006, GMB 0851-0032
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| | | | |
|---|--|--------------------------------|-----------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816). | | Complete if Known | |
| FEE TRANSMITTAL For FY 2005 | | Application Number | 10/650,881 |
| | | Filing Date | 8/28/2003 |
| | | First Named Inventor | Ciprian Goodman |
| | | Examiner Name | |
| | | Art Unit | 2131 |
| TOTAL AMOUNT OF PAYMENT (\$0) | | Attorney Docket No. MS1-1684US | |

METHOD OF PAYMENT (check all that apply)

| | | | | |
|--|--------------------------------------|---|-------------------------------|---|
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 12-0769 Deposit Account Name: Leo & Hayes, PLLC | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below | | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 or 1.17 | | <input checked="" type="checkbox"/> Credit any overpayments | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2032. | | | | |

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| APPLICATION TYPE | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | FEES PAID (\$) |
|------------------|--------------|----------|--------------|----------|------------------|----------|----------------|
| | SMALL ENTITY | Fee (\$) | SMALL ENTITY | Fee (\$) | SMALL ENTITY | Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | _____ |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | _____ |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | _____ |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | _____ |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | _____ |

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent
 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent
 Multiple dependent claims

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | Small Entity |
|---|--------------|----------|---------------|---------------------------|---------------|
| 20 or HP = | x 50 | = | | | Fee (\$) |
| HP = highest number of total claims paid for, if greater than 20 | | | | | Fee (\$) |
| Index. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Fee (\$) | Fee Paid (\$) |
| - 3 or HP = | x 200 | = | | | |
| HP = Highest number of independent claims paid for, if greater than 3 | | | | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)
 for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 = | / 50 = | (round up to a whole number) x | = | Fee Paid (\$) |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other:

| | | | |
|--------------------|--------------------------|------------------------|--------------------------|
| SUBMITTED BY | Signature: Brian G. Hart | Registration No. 44421 | Telephone (509) 324-8256 |
| Name (Print/Type): | Brian G. Hart | Date: 01/08/05 | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to be fed (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and maintaining the requested application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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EV554746695

1 IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

2 Serial No. 10/650,891
3 Filing Date 8/28/2003
Confirmation No. 8737
4 Inventorship Ciprian Gociman
Applicant Microsoft Corporation
Group Art Unit 2131
5 Examiner
6 Attorney's Docket No. MS1-1684US
Title: Delegated Administration of a Hosted Resource

7 INFORMATION DISCLOSURE STATEMENT AND
CERTIFICATION UNDER 37 CFR 1.97(e)

8 The citations listed, copies attached, may be material to the examination of
9 the subject application and are therefore submitted in compliance with the duty of
10 disclosure defined in 37 CFR §1.56. The Examiner is requested to make these
11 citations of official record in this application.

12 I hereby certify that to my knowledge, after reasonable inquiry, that each
13 item of information contained in the information disclosure statement was cited in
14 a communication from a foreign patent office in a counterpart foreign application
15 not more than three months prior to the filing of the statement.

16 Furthermore, each item of information contained in the information
17 disclosure statement was cited in a communication from a foreign patent office in
18 a counterpart application and this communication was not received by any
19 individual designated in §1.56(c) more than thirty days prior to the filing of the
20 information disclosure statement.

21 Respectfully Submitted,

22 Date: 01/06/05

23 By: Brian G. Hart
24 Brian G. Hart
Reg. No. 44,421



PTO/SB/08A (08-03)

Approved for use through 07/31/2006, OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Shee

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Complete if Known

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|----------------------|-----------------|
| Application Number | 10/650,891 |
| Filing Date | 8/28/2003 |
| First Named Inventor | Ciprian Gociman |
| Art Unit | 2131 |
| Examiner Name | |

Attorney Docket Number MS1-1684US

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

| FOREIGN PATENT DOCUMENTS | | | | | |
|--------------------------|-----------------------|---|--------------------------------|--|---|
| Examiner Initials' | Cite No. ¹ | Foreign Patent Document | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
| | | Country Code ² -Number ³ -Kind Code ⁴ (if known) | | | |
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**Examiner
Signature**

Kavoh Abrishamkar

Date
Considered

03/05/2008

***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kind Codes of USPTO Patent Documents at www.uspto.gov or MPEP Section 801.04, 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3), 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to check a mark here if English language Translation is attached.

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| Substitute for form 1449/PTO | | | | Complete if Known | |
| INFORMATION DISCLOSURE STATEMENT BY APPLICANT | | | | Application Number | 10/860,891 |
| | | | | Filing Date | 8/28/2003 |
| | | | | First Named Inventor | Ciprian Gociman |
| | | | | Group Art Unit | 2131 |
| | | | | Examiner Name | |
| (use as many sheets as necessary) | | | | | |
| Sheet | 2 | of | 2 | Attorney Docket Number | MS1-1684US |

NON-PATENT LITERATURE DOCUMENTS

| Examiner Initials* | Cite No. | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
|--------------------|----------|---|----------------|
| /K.A./ | | SCHMIDT, Don; "SEC300: Application Security Model In Windows.NET", Online! 2002, XP002306044 Retrieved from the Internet: URL:< http://web.mit.edu/pismere/presentations/teched2002/new-ms-kerberos-extensions.ppt > retrieved on 2004-11-17 | |
| /K.A./ | | ALIKOSKI, Aali, "Windows Server Authorization Manager", 'Online! 26 October 2001 (2001-10-26), XP002306045 Retrieved from the Internet: URL:< http://www.dotnetmaillama.com/video/20102003/4/Authorization_Manager.ppt > retrieved on 2004-11-17 | |
| /K.A./ | | 'Delegation of Control Wizard', 'Online! 5 September 2002 (2002-09-05), XP002306046 Retrieved from the Internet: URL:< http://www.serverwatch.com/tutorials/article.php/10825_1472441_2 > retrieved on 2004-11-17 | |
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|-----------------------|---------------------|--------------------|------------|
| Examiner Signature | /Kaveh Abrishamkar/ | Date Considered | 03/05/2008 |
|-----------------------|---------------------|--------------------|------------|

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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